PTO/SB/31 (09-06)

Approved for use through 03/31/2007. OM8 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are requi	ired to respond to a co	allection of info	innation L	unless it displays a valid QMB control number
NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 4320-556		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to	In re Application of			
	Cote et al.			
	Application Number			Filed
"Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)]	10/786.042			February 26, 2004
on	10/700,012			reducing and another
Signature	For POTTING METHOD FOR MEMBRANE MODULE			MBRANE MODULE
-	Art Unit			
Typed or printed name	1723 Menon, Krishr			S.
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.				
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))				
1 file fee for this Notice of Appeal is (37 GPR 41.20(b)(1)) \$ 500.00				
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account I have enclosed a duplicate copy of this sheet.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>022095</u> . I have enclosed a duplicate copy of this sheet.				
☐ A petition for an extension of time under 37 CFR 1.138(a) (PTO/SB/22) is enclosed.				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
am the			M	Lower
ppilicant/inventor.			1	Signature
assignee of record of the entire interest.			imes A. S	Raakman
See 37 CFR 3.71. Statement under 37 CFR 3,73(b) is enclosed. Typed or printer (Form PTO/S8/96)				yped or printed name
attorney or agent of record.			16-364-7	311
Registration number 56.524 .				Telephone number
attorney or agent acting under 37 CFR 1.34.				
Registration number if acting under 37 CFR 1.34.			April 18, 2007	
_			Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(e) are required Submit multiple forms if more than one signature is required, see below*.				

Total of 1 forms are submitted.

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO This collection of information is required by 37 Cert 41.31. The information is required to obtain or retain a benefit by the public which is to life (and by the USPT) to process) an application. Confidentially is governed by 3 St. Sc. 12 and 37 CER 11.1.1.1 and 46.1. This collection is estimated to late it or timulate to complete, including gathering, preparing, and submitting the completed application from to the USPTO Time will vary depending upon the individual case. Any comments on the amount of time by useque to complete the riter and/or suggestions for reducing this bruden, should be sent to the Client Internation Officer, U.S. Patient and Trasferank Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, V.A. 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO Commissioner for Patients, P.O. Box 1450, Alexandria, V.A. 22313-1450.